



**STATE OF MONTANA  
DEPARTMENT OF CORRECTIONS  
POLICY DIRECTIVE**

Policy No. DOC 4.5.17	Subject: <b>OFFENDER SICK CALL</b>
Chapter 4: FACILITY/PROGRAM SERVICES	Page 1 of 2
Section 5: Health Care for Secure Facilities	Effective Date: Jan. 1, 1998
Signature: /s/ Bill Slaughter, Director	Revision Date: April 18, 2006

**I. POLICY**

The Department of Corrections facility health units will provide a sick call system through which offenders may be evaluated and treated in a timely manner for non-emergent illness or injury.

**II. APPLICABILITY**

The secure facilities that include Riverside and Pine Hills Youth Correctional Facilities, Montana State Prison, Montana Women's Prison, and the private and regional facilities contracted to the Department of Corrections.

**III. REFERENCES**

- A. *National Commission on Correctional Health Care Standards, 2003*
- B. *DOC Policy 4.5.21, Health Evaluation of Offenders in Disciplinary Units/Lockup*

**IV. DEFINITIONS**

Sick Call – The evaluation and treatment of an ambulatory patient by a qualified health care provider in a clinical setting, either on or off-site.

Triage – A process of sorting and classifying offender health requests to prioritize health care needs and determine place of service delivery.

Health Care Providers – Licensed health care providers (e.g., physicians, nurses, psychiatrists, dentists, and mental health practitioners), including contracted or fee-for-service providers, responsible for offender health care and treatment.

**V. DEPARTMENT DIRECTIVES**

**A. General Requirements**

1. All facility health care units will ensure that a registered nurse, or a licensed practical nurse with RN oversight, will evaluate and triage each offender health complaint.
2. A health care provider will see and evaluate the offender when a medical, dental, or mental health care request describes a clinical symptom.
3. Nursing personnel may initiate treatment according to Department nursing protocols or schedule the offender for an appointment with a primary care provider or a mid-level practitioner.

Policy No. DOC 4.5.17	Chapter 4: Facility/Program Services	Page 2 of 2
Subject: <b>OFFENDER SICK CALL</b>		

## **B. General Population Offenders**

1. Offenders must submit health care requests in accordance with facility procedures.
2. Sick call times and locations may vary among facilities; however, facility sick call schedules will meet the following minimum requirements:
  - two days a week for facilities with fewer than 100 offenders
  - three days a week for facilities between 101 and 200 offenders
  - five days a week for facilities with more than 200 offenders
3. Health care providers must have offender health care records available at the time of the sick call contact.
4. Offenders must be seen by a primary care provider within one week of the nursing assessment when:
  - a. indicated by protocol;
  - b. referred by nursing or a mid-level practitioner; or
  - c. an offender reports to sick call more than twice with the same complaint and has not seen a physician.
5. When a nursing assessment is required, the offender will be seen individually in a designated area to ensure privacy and confidentiality.
6. When an offender request does not require a nursing assessment, health care providers must respond to the request in writing.
7. Health care providers will evaluate and document each offender health complaint in the offender medical file. Staff will provide the offender with a verbal explanation of the assessment findings, any further recommended treatment or evaluation, and any patient education relevant to the health complaint.

## **C. Locked-Down Offenders**

1. Health care providers will conduct daily sick call for locked-down offenders in accordance with *DOC 4.5.21, Locked Housing Offender Health Evaluation*.

## **VI. CLOSING**

Questions concerning this policy should be directed to the Department medical director.